	HC	FA RECORD	SPECIFICATION	
FILE NAME:			DATE:	
ESRD FACILITY D	DATA		July 1996	
Field	Size	Location	Remarks	
1. Provider Master No.	6	1- 6	Identification number of provider. First 2 digits= State Code-Attachment A. Next 4 digits beginning with: 0=Short Stay Hospital 20=Long Term Hospital 25-28=Free-Standing Renal 33=Children's Hospital 35=Hospital ESRD Satellite	
2. Provider Name	38	7- 44	Name of Facility (First 38 characters including blanks)	
3. Street Address	38	45- 82	Street Address of Facility (First 38 Characters Including Blanks)	
4. City 31	83-113	3 City of Provi	der	
5. State	2	114-115	State Abbreviation (See Attachment A)	
6. Zip	5	116-120	5 Position Zip Code	
7. For Future Use	3	121-123	Blank	
8. CCPD	1	124	Code to Indicate Continuous Cycle Peritoneal Dialysis Y=Yes N=No	
9. Maintenance Hemo	1	125	Code to Indicate Staff Assisted Hemodialysis Y=Yes N=No	
10. Maintenance Peri	1	126	Code to Indicate Staff Assisted Peritoneal Dialysis Y=Yes N=No	
11. Self-Care Hemo	1	127	Code to Indicate In-Unit Self- Care Hemodialysis at Facility Y=Yes N=No	
				Page 1

	HCFA	RECORD S	PECIFICATION
FILE NAME:			DATE:
ESRD FACILITY D	ATA		July 1996
Field	Size	Location	Remarks
12. Self-Care Peri	1	128	Code to Indicate In-Unit Self- Care Peritoneal Dialysis at Facility Y=Yes N=No
13. Training Hemo	1	129	Code to Indicate Hemodialysis Training at Facility Y=Yes N=No
14. Training Peri	1	130	Code to Indicate Peritoneal Dialysis Training Y=Yes N=No
15. CAPD	1	131	Indicates CAPD (Continuous Ambulatory Peritoneal Dialysis) Y=Yes N=No
16. Total Stations	3	132-134	Total Number of Dialysis Stations at Facility
17. Certification Date	6	135-140	YYMMDD-Date of Certification to provide renal services
18. Certification Type	1	141	Code Indicating Type of Facility Certification (See Item 19. Certification Type.)
19. Survey Cert	1	142	Certification type used for Facility Survey Purposes 1=Transplant Center Only 2=Dialysis Center (usually a hospital rendering full spectrum of dialysis services including laboratory tests.) 3=Dialysis Facility Hospital (A unit separate from but located within the hospital. Renders dialysis servcies but not full spectrum.) 4=Dialysis Facility (Not a hospital. Renders dialysis services but not full spectrum. Also referred to as independent facilities.) 5=Transplant and Dialysis Center (A hospital rendering transplants and full spectrum of dialysis services.)
			Page 2

			SPECIFICATION
FILE NAME:			DATE:
ESRD FACILITY DA	ATA		July 1996
Field	Size	Location	Remarks
			6=Special Purpose Facility (There are no approved facilities in this category. Therefore, definition has been omitted.) 7=Inpatient Care Only (Hospitals approved as a dialysis center but usually does 80% of dialysis on inpatient basis.)
20. Prior Cert Date	6	143-148	YYMMDD Prior Certification
21. Prior Cert Type	1	149	See Item 19. For Certification Type.
22. Termination Date	6	150-155	YYMMDD Blanks Unless Facility terminated
23. Termination Reason	1	156	Reason Facility Terminated Blank if Not terminated 1=Involuntary Withdrawal 2=Failure to Meet Health and Safety Standards terminated 3=Failure to Meet Minimum Utilization Rates (MUR) 4=Failure to Meet Need Requirements 5=Closed 6=Other
24. Prior Term Date	6	157-162	YYMMDD Prior Termination Date
25. Prior Term Reason	1	163	See Termination Reason #22
26. For Future Use	6	164-169	Blank
27. Intermediary	5	170-174	Identification number of current intermediary authorized to process bills from this provider
28. ESRD Current Network	2	175-176	Renal Network Number Provider is assigned (01-18) (Attachment A)
29. Region	2	177-178	HCFA Regional Office Code (01-10) (Attachment A)

HCFA RECORD SPECIFICATION

FILE NAME:	11011		DATE:
ESRD FACILITY D) A T A		July 1996
			,
Field	Size	Location	Remarks
30. Old Network 2	179-180	Network Desigr	ation as published in <u>Federal Register</u> 06/03/76 (01-32) (Attachment A - old Networks only valid for years prior to 1988)
31. MSA	5	181-185	FIPS MSA Number (4 Positions) 5th Position is Size (A-D) A=1 million or more B=250,000 to 1 million C=100,000 to 250,000 D=Less than 100,000 Note: Size not complete
32. SSA County Code	3	186-188	Geographic code assigned by SSA standards
33. FIPS	5	189-193	Geographic Code Assigned by FIPS standards (Federal Information Processing Standard Code)
34. For Future Use	6	194-199	Blank
35. Cross Refer No.	6	200-205	Provider No. issued by MMACS for hospitals only
36. Convert No.	6	206-211	Indicates provider number for either change of ownership transfer of stations, or number change
37. FYEND	4	212-215	MMDD of Fiscal Year End
38. Telephone Number	10	216-225	Area Code plus phone number of facility
39. For Future Use	2	226-227	Blank
			Page 4

HCFA RECORD SPECIFICATION

	псг	A KECOKD	SFECIFICATION	
FILE NAME:			DATE:	
ESRD FACILITY	DATA		July 1996	
Field	Size	Location	Remarks	
40. Type Ownership	2	228-229	Type of Ownership	
			01=Individual-Profit	
			02=Partnership-Profit	
			03=Corporation-Profit	
			04=Other-Profit	
			05=Individual-Nonprofit	
			06=Partnership-Nonprofit	
			07=Corporation-Nonprofit	
			08=Other-Nonprofit	
			09=State-Government	
			Non-Federal	
			10=County-Government	
			Non-Federal	
			11=City-Government	
			Non-Federal	
			12=City/County-Government	
			Non-Federal	
			13=Hospital District/Authority	
			Government Non-Federal	
			14=Other-Government Non-Federal	
			15=Veterans Administration	
			Government Federal	
			16=Public Health Service-	
			Government Federal	
			17=Military-Government Federal	
			18=Other-Government Federal	
41. Skeleton Record	1	230	For Non-Medicare Renal	
The shortest record		230	Facilities for which HCFA	
			receives HCFA forms	
			V=Non-Medicare VA Facilities	
			W=Medicare VA Facilities	
			Y=Other	
			1 0 0.00	
42. Change Date	4	231-234	MMYY of last change to record	
<i>y</i>		-	6	
				Page 5

HCFA RECORD SPECIFICATION				
FILE NAME:			DATE:	
ESRD FACILITY DA	ATA		July 1996	
Field	Size	Location	Remarks	
FACILITY SURVEY DIALYSIS PATIENTS				
43. Beginning In-Unit	3	235-237	In-Unit patients receiving care beginning of Survey Period (Item 01)	
44. Beginning Home	3	238-240	Home patients receiving care beginning of Survey Period (Item 02)	
45. Beginning Total	3	241-243	Total patients receiving care beginning of Survey Period (Items 01+02) (Item 03)	
46. In-Unit First Start	3	244-246	In-Unit started for first time ever addition during Survey Period (Item 04A)	
47. Home First Start	3	247-249	Home started for first time ever addition during Survey Period (Item 04B)	
48. In-Unit Restarted	3	250-252	In-Unit Restarted Addition During Survey Period (Item 05A)	
49. Home Restarted	3	253-255	Home Restarted Addition during Survey Period (Item 05B)	
50. In-Unit Transferred In	3	256-258	In-Unit Transferred from other dialysis unit-addition during Survey Period (Item 6A)	
51. Home Transferred In	3	259-261	Home Transferred from other dialysis unit-addition during Survey Period (Item 06B)	
52. In-Unit Transplant Return	3	262-264	In-Unit Returned After Transplantation-Addition during Survey Period (Item 07A)	
			Page	

HCFA RECORD SPECIFICATION				
FILE NAME:			DATE:	
ESRD FACILITY DA	ATA		July 1996	
Field	Size	Location	Remarks	
53. Home Transplant Return	3	265-267	Home Returned After Transplant Addition During Survey Period (Item 07B)	
54. In-Unit Deaths	3	268-270	In-Unit Deaths-Losses During Survey Period (Item 08A)	
55. Home Deaths	3	271-273	Home Deaths-Losses During Survey Period (Item 08B)	
56. In-Unit Recovered	3	274-276	In-Unit Recovered Kidney Function Losses During Survey Period (Item 09A)	
57. Home Recovered	3	277-279	Home Recovered Kidney Function Losses During Survey Period (Item 09B)	
58. In-Unit Received Transplant	3	280-282	In-Unit Received Transplant Losses During Survey Period (Item 10A)	
59. Home Received Transplant	3	283-285	Home Received Transplant Losses During Survey Period (Item 10B)	
60. In-Unit Transferred Out	3	286-288	In-Unit Transferred to other dialysis unit - Losses During Survey Period (Item 11A)	
61. Home Transferred Out	3	289-291	Home Transferred to other dialysis unit - Losses During Survey Period (Item 11B)	
62. In-Unit Discontinued	3	292-294	In-Unit Discontinued Dialysis Losses During Survey Period (Item 12A)	
63. Home Discontinued	3	295-297	Home Discontinued Dialysis Losses During Survey Period (Item 12B)	Page

	HCF	HCFA RECORD SPECIFICATION				
FILE NAME:			DATE:			
ESRD FACILITY	DATA		July 1996			
Field	Size	Location	Remarks			
64. In-Unit Other	3	298-300	In-Unit Other (LTFU) Losses			
			During Survey Period			
			(Item 13A)			
65. Home Other	3	301-303	Home Other (LTFU) Losses			
			During Survey Period			
			(Item 13B)			
66. Staff Hemo	3	304-306	Staff-assisted and/or			
00 1 2 w 11 11 0 11 0			hemodialysis			
			patients receiving care at			
			end of Survey Period			
			(Item 14)			
67. Staff IPD	3	307-309	Staff-assisted and/or			
			intermittent			
			peritoneal dialysis patients			
			receiving care at end of			
			Survey Period (Item 15)			
68. Hemo Training	3	310-312	Self-dialysis training			
			hemodialysis patients			
			receiving care at end of			
			Survey Period (Item 16)			
69. IPD Training	3	313-315	Self-dialysis training intermittent			
			peritoneal dialysis patients			
			receiving care at end of			
			Survey Period (Item 17)			
70. CAPD	3	316-318	Self-dialysis training			
			CAPD patients receiving			
			care at end of Survey			
			Period (Item 18)			
71. CCPD	3	319-321	Self-dialysis training			
			CCPD patients receiving			
			care at end of Survey			
			Period (Item 19)			
72. Total In-Unit	3	322-324	Total In-Unit patients			
			receiving care at end of			
			Survey Period-Items 16			
			thru 19 (Item 20)	Page 8		

	HCFA	A RECORD	SPECIFICATION	
FILE NAME:			DATE:	
ESRD FACILITY D	ATA		July 1996	
Field	Size	Location	Remarks	
73. Home Hemo	3	325-327	Hemodialysis home patients receiving care at end of Survey Period (Item 21)	
74. Home IPD	3	328-330	Intermittent Peritoneal Dialysis home patients receiving care at end of Survey Period (Item 22)	
75. Home CAPD	3	331-333	CAPD home patients receiving care at end of Survey Period (Item 23)	
76. Home CCPD	3	334-336	CCPD home patients receiving care at end of Survey Period (Item 24)	
77. Total Home	3	337-339	Total home patients receiving care at end of Survey Period -Items 21 thru 24 (Item 25)	
78. Total Patients	3	340-342	Total patients receiving care at end of Survey Period-Items 20 and 25 (Item 26)	
79. Medicare Enrolled	3	343-345	Currently enrolled in Medicare patient eligibility status end of Survey Period (Item 27)	
80. Application Pending	3	346-348	Medicare application pending- Patient eligibility status end of Survey Period (Item 28)	
81. Non-Medicare	3	349-351	Non-Medicare patient eligibility status end of Survey Period (Item 29)	
82. Hemo Completed Training	3	352-354	Hemodialysis self-dialysis patients completing training (Item 30)	Page 9

FILE NAME:			DATE:	
ESRD FACILITY DA	ТА		July 1996	
Field	Size	Location	Remarks	
33. IPD Completed Training	3	355-357	IPD self-dialysis patients completing training (Item 31)	
34. CAPD Completed Training	3	358-360	CAPD Self-Dialysis patients completing training (Item 32)	
35. CCPD Completed Training	3	361-363	CCPD Self-Dialysis patients completing training (Item 33)	
36. Transient Patients Treated	3	364-366	Transient patients treated during Survey Period (Item 34)	
DIALYSIS TREATMI	NTS			
37. Transient Treatments	5	367-371	Number of Transient Patients treatments during Survey Period (Item 35)	
88. Outpatient Hemo tmts	5	372-376	Number of Hemodialysis Outpatient Treatments (Item 36)	
39. Outpatient IPD tmts	5	377-381	Number of IPD Outpatient Treatments (Item 37)	
00. Hemo Training Tmts	5	382-386	Number of Hemodialysis Training Treatments (Item 38)	
01. IPD Training Tmts	5	387-391	IPD Training Treatments (Item 39)	
22. CAPD Training Tmts	5	392-396	CAPD Training Treatments (Item 40)	
23. CCPD Training Tmts	5	397-401	CCPD Training Treatments (Item 41)	
KIDNEY TRANSPLA	NTS			
94. Patients Transplanted	3	402-404	Patients who received transplant at this facility (Item 42)	Page 1

FILE NAME:			DATE:	
ESRD FACILITY DA			July 1996	
Field	Size	Location	Remarks	
95. Medicare Patients Transplanted	3	405-407	Patients Transplanted and Currently enrolled in Medicare (Item 43)	
96. Medicare Application Pending	3	408-410	Patients Transplanted and Medicare Application Pending (Item 44)	
97. Non-Medicare Transplants-U.S.	3	411-413	Patients Transplanted and Non-Medicare-U.S. Resident (Item 45)	
98. Non-Medicare Transplants-Other	3	414-416	Patients Transplanted and Non-Medicare-Other (Item 46)	
99. Living Related Donor Transplants	3	417-419	Living Related Donor Transplants Performed (Item 47)	
100. Living Unrelated Donor Transplants	3	420-422	Living Unrelated Donor Transplants Performed (Item 48)	
101. Cadaveric Donor Transplants	3	423-425	Cadaveric Donor Transplants Performed (Item 49)	
102. Total Transplants	3	426-428	Total Transplants Performed Items 47 thru 49 (Item 50)	
103. Dialysis Awaiting Transplants	3	429-431	Dialysis Patients Awaiting Transplant (Item 51)	
104. Non-Dialysis Awaiting	3	432-434	Non-Dialysis Patients Awaiting Transplant (Item 52)	
KIDNEYS				
105. Harvested and Transplanted	3	435-437	Cadaver Kidneys Harvested and Transplanted at this Facility (Item 53)	
				Page

HCFA RECORD SPECIFICATION

FILE NAME: ESRD FACILITY I	DATA		DATE: July 1996
Field	Size	Location	Remarks
106. Harvested and Sent-U.S.	3	438-440	Cadaver Kidneys Harvested at this Center and Sent to another U.S. Facility (Item 54)
107. Harvested and Sent-Non U.S.	3	441-443	Cadaver Kidneys Harvested at this Center and Sent Outside the U.S. (item 55)
108. Harvested and Nonviable	3	444-446	Cadaver Kidneys Harvested at this Center and Nonviable (Item 56)
109. Total Harvested	3	447-449	Total Cadaver Kidneys Harvested at this Center (Item 57)
110. Obtained and Transplanted	3	450-452	Cadaver Kidneys Obtained from Another Transplant Hospital and Transplanted at this Facility (Item 58)
111. Obtained and Sent-U.S.	3	453-455	Cadaver Kidneys Obtained from Another Transplant Hospital and Sent to Another U.S. Facility (Item 59)
112. Obtained and Sent-Non U.S.	3	456-458	Cadaver Kidneys Obtained from Another Transplant Hospital and Sent Outside the U.S. (item 60)
113. Obtained and Nonviable	3	459-461	Cadaver Kidneys Obtained from Another Transplant Hospital and Nonviable (Item 61)
114. Total Obtained	3	462-464	Total Cadaver Kidneys Obtained from Another Transplant Hospital (Item 62)
			Page 1

FILE NAME:			DATE:		
ESRD FACILITY DATA			July 1996		
Field	Size	Location	Remarks		
115. Obtained from OPO Transplanted	3	465-467	Cadaver Kidneys Obtained from Independent OPO and Transplanted at this Facility (Item 63)		
116. Obtained from OPO and Sent-U.S.	3	468-470	Cadaver Kidneys Obtained from Independent OPO and Sent to Another U.S. Facility (Item 64)		
117. Obtained from OPO and Sent-Non U.S.	3	471-473	Cadaver Kidneys Obtained from Independent OPO and sent Outside the U.S. (Item 65)		
118. Obtained from OPO and Nonviable	3	474-476	Cadaver Kidneys Obtained from Independent OPO and Nonviable (Item 66)		
119. Total Obtained from OPO	3	477-479	Total Cadaver Kidneys Obtained from Independent OPO (Item 67)		
120. Obtained and Transplanted	3	480-482	Cadaver Kidneys Obtained from Non-Transplant Hospital and Transplanted at this facility (Item 68)		
121. Obtained and Sent U.S.	3	483-485	Cadaver Kidneys Obtained from Non-Transplant Hospital and sent to another U.S. Facility (Item 69)		
122. Obtained and Sent Non U.S.	3	486-488	Cadaver Kidneys Obtained from Non-Transplant Hospital and sent outside the U.S. (Item 70)		
123. Obtained and Nonviable	3	489-491	Cadaver Kidneys Obtained from Non-Transplant Hospital and Nonviable (Item 71)		

ı

HCFA RECORD SPECIFICATION					
FILE NAME: ESRD FACILITY DATA			DATE: July 1996		
Field	Size	Location	Remarks		
124. Total Obtained	3	492-494	Total Cadaver Kidneys Obtained from Non-Transplant Hospital (Item 72)		
125. Total Cadaver Transplanted	3	495-497	Total Cadaver Kidneys Transplanted at this Facility (Item 73)		
126. Total Cadaver Sent-U.S.	3	498-500	Total Cadaver Kidneys Sent to Another U.S. Facility (Item 74)		
127. Total Cadaver Sent-Non U.S.	3	501-503	Total Cadaver Kidneys Sent Outside the U.S. (item 75)		
128. Total Nonviable	3	504-506	Total Cadaver Kidneys Nonviable (Item 76)		
129. Nonviable Research	3	507-509	Total Nonviable Kidneys Used for research (Item 77)		
130. Nonviable Discarded	3	510-512	Total Nonviable Kidneys Discarded (Item 78)		
131. Survey Year	2	513-514	Year of Survey YY		
			Page 14		

ATTACHMENT A

State Code Conversion Table

State Name	State Code	HCFA Region	Network	Old Network
Alabama	AL	4	8	18-20
Alaska	AK	10	16	2
Arizona	AZ	9	15	6
Arkansas	AR	6	13	10-18
California	CA	9	17, 18	3, 4
Colorado	СО	8	15	5
Connecticut	СТ	1	1	27
Delaware	DE	3	4	24, 31
District of Columbia	DC	3	5	23
Florida	FL	4	7	19
Georgia	GA	4	6	18-20
Hawaii	HI	9	17	1
Idaho	ID	10	16	2
Illinois	IL	5	10	8, 9, 15
Indiana	IN	5	9	16

State Name	State Code	HCFA Region	Network	Old Network
Iowa	IA	7	12	8
Kansas	KS	7	12	9
Kentucky	KY	4	9	17
Louisiana	LA	6	13	12
Maine	ME	1	1	28
Maryland	MD	3	5	23, 31
Massachusetts	MA	1	1	28
Michigan	MI	5	11	7, 14
Minnesota	MN	5	11	7
Missouri	МО	7	12	9, 18
Mississippi	MS	4	8	18
Montana	MT	8	16	2
Nebraska	NE	7	12	5
Nevada	NV	9	15	3, 4
New Hampshire	NH	1	1	28
New Jersey	NJ	2	3	32
New Mexico	NM	6	15	6
New York	NY	2	2	25, 26
North Carolina	NC	4	6	21
North Dakota	ND	8	11	7

State Name	State Code	HCFA Region	Network	Old Network
Ohio	ОН	5	9	17, 22
Oklahoma	OK	6	13	10
Oregon	OR	10	16	2
Pennsylvania	PA	3	4	22, 24, 26
Puerto Rico	PR	2	3	29
Rhode Island	RI	1	1	28
South Carolina	SC	4	6	20
South Dakota	SD	8	11	7
Tennessee	TN	4	8	18
Texas	TX	6	14	11
Utah	UT	8	15	5, 6
Vermont	VT	1	1	28
Virginia	VA	3	5	18, 30, 23
Virgin Islands	VI	2	3	29
Washington	WA	10	16	2
West Virginia	WV	3	5	30
Wisconsin	WI	5	11	7, 13
Wyoming	WY	8	15	5
American Samoa	AS	64	17	1

State Name	State Code	HCFA Region	Network	Old Network
Guam	GU	65	17	1
Mariana Island	MI	66	17	1